

**SEMINOLE COUNTY GOVERNMENT  
AGENDA MEMORANDUM**

**SUBJECT:** Sunshine State Games Water Polo Championships Agreement

**DEPARTMENT:** Economic Development

**DIVISION:** Tourism Development

**AUTHORIZED BY:** William McDermott

**CONTACT:** Fran Sullivan

**EXT:** 2906

**MOTION/RECOMMENDATION:**

Approve and authorize the Chairman to execute an agreement with Florida Sports Charitable Foundation, Inc., for the 2009 Sunshine State Games Water Polo Championships in the amount of \$7,600.00

County-wide

William McDermott

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**BACKGROUND:**

The Florida Sports Charitable Foundation is the arm of the Florida Sports Foundation, Florida's official sports promotion and development organization. One of its primary functions is the management of the Sunshine State Games. The Games are Olympic-style programs and events created throughout the state for amateur athletes of all ages and skill levels. Previous events have been staged in Broward and Dade Counties, with as many as forty-four (44) teams in attendance.

The 2009 Water Polo Championships will be held June 12-14 at the Seminole High Aquatic Center in Sanford and Lake Brantley Aquatic Center in Altamonte Springs. Approximately 38 adult and youth water polo teams from across the state of Florida are expected to compete. The event is expected to generate at least 350 room nights, with estimated direct economic impact of \$399,100.

Tourist tax funds will be used to pay facility usage fees. The Tourist Development Council recommends this expenditure, and funds are available in Tourism Development's FY 2008-09 promotional budget.

**STAFF RECOMMENDATION:**

Staff recommends that the Board approve and authorize the Chairman to execute an agreement with Florida Sports Charitable Foundation, Inc., for the 2009 Sunshine State Games Water Polo Championships in the amount of \$7,600.00.

## **ATTACHMENTS:**

### 1. Agreement

#### **Additionally Reviewed By:**

- ☒ Budget Review ( Angela Singleton, Lisa Spriggs )
- ☒ County Attorney Review ( Ann Colby )

**SUNSHINE STATE GAMES WATER POLO CHAMPIONSHIPS AGREEMENT**

**THIS AGREEMENT** is made and entered this \_\_\_\_\_ day of \_\_\_\_\_, 2009, by and between **SEMINOLE COUNTY**, a political subdivision of the State of Florida, whose address is Seminole County Services Building, 1101 East First Street, Sanford, Florida 32771, hereinafter referred to as "COUNTY", and **THE FLORIDA SPORTS CHARITABLE FOUNDATION, INC.**, whose address is 2930 Kerry Forest Parkway, Tallahassee, Florida 32309, hereinafter referred to as "FLORIDA SPORTS".

**W I T N E S S E T H:**

**WHEREAS**, the Florida State Legislature enacted Section 125.0104, Florida Statutes, known as the "Local Option Tourist Development Act" in response to the growing need of Florida counties to provide additional revenue sources for tourist development to stimulate the local economy; and

**WHEREAS**, Section 125.0104, Florida Statutes, provides that Tourist Development Tax Revenues may be used to acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate, or promote publicly owned or operated convention centers, sports stadiums, sports arenas, coliseums, or auditoriums within the boundaries of COUNTY's special taxing district in which the tax is levied; and

**WHEREAS**, the voters of Seminole County approved by referendum the imposition of the Tourist Development Tax on transient rental accommodations in Seminole County; and

**WHEREAS**, COUNTY, in coordination with the Tourist Development Council, wishes to appropriate Tourist Development Tax Revenues as operational funds to host the Sunshine State Games Water Polo Championships to be held at Lake Brantley Aquatic Center in Altamonte Springs, Florida and Seminole High Aquatic Center June 12-14, 2009, both facilities in Seminole County, Florida; and

**WHEREAS,** said tourist tax monies will be used to pay for the above-listed publicly owned and operated facilities,

**NOW, THEREFORE,** in consideration of the mutual understandings and agreements set forth herein, COUNTY and FLORIDA SPORTS agree as follows:

**Section 1. Term.** This Agreement shall be effective from January 1, 2009 until December 31, 2009, notwithstanding the date it is executed by the parties, unless earlier terminated as provided herein.

**Section 2. Termination.** This Agreement may be terminated by either party at any time, with or without cause, upon not less than thirty (30) days written notice to the other party as provided for herein or, at the option of COUNTY, immediately in the event that FLORIDA SPORTS fails to fulfill any of the terms, understandings, or covenants of this Agreement. COUNTY shall not be obligated to pay for any services provided or costs incurred by FLORIDA SPORTS after FLORIDA SPORTS has received notice of termination.

**Section 3. Services.**

(a) The funds from this Agreement shall be used to pay facility use fees at the Lake Brantley Aquatic Center and the Seminole High Aquatic Center for the Sunshine State Games Water Polo Championships, as described in Exhibit A, attached hereto and incorporated herein by reference.

(b) FLORIDA SPORTS shall submit written invoices to COUNTY for payment of facility use for the water polo games, not to exceed TWO THOUSAND AND NO/100 DOLLARS (\$2,000.00) for the use of Seminole High Aquatic Center and not to exceed FIVE THOUSAND SIX HUNDRED AND NO/100 DOLLARS (\$5,600.00) for the use of the Lake Brantley Aquatic Center. The not to exceed amount for both venues is SEVEN THOUSAND SIX HUNDRED AND NO/100 DOLLARS (\$7,600.00).

(c) The COUNTY shall pay the above listed invoices from tourist tax funds directly to the governmental entities owning the used facilities no later than thirty (30) days after their submission.

(d) All promotional packages sent out by FLORIDA SPORTS for the water polo games, as listed in Exhibit "A", must contain a list of Seminole County hotels provided by the Seminole County Convention and Visitors Bureau. No other hotel list may be included in the promotional packet. All such promotional packets must be approved by COUNTY prior to distribution in order to qualify for reimbursement.

(e) FLORIDA SPORTS shall permit a third-party company, as designated by the COUNTY to conduct on-site surveys during the Sunshine State Games Water Polo Championships to coordinate the survey process. FLORIDA SPORTS shall cooperate in making their water polo championships accessible in whatever manner necessary for completion of the survey.

(f) After-Event preliminary statistics for room nights and economic impact must be submitted to COUNTY no later than thirty (30) days after the final water polo championship.

(g) A hotel poll reflecting an accurate accounting of room nights used for each water polo championship shall be conducted by FLORIDA SPORTS and submitted to COUNTY no later than thirty (30) days after the water polo championship.

(h) FLORIDA SPORTS shall be required to have and maintain a website for the purpose of promoting tourism to and attendance at FLORIDA SPORTS's water polo championships. Said website shall be linked to the Seminole County Tourism website ([www.visitseminole.com](http://www.visitseminole.com)) and such link shall be maintained throughout the duration of this Agreement.

(i) Failure to comply with or failure to meet the requirements of this Section, including time deadlines, shall result in termination of this Agreement and forfeiture of all financial assistance rendered to

FLORIDA SPORTS by COUNTY pursuant to this Agreement.

**Section 4. Liability and Insurance.**

(a) **Liability.** COUNTY and its Commissioners, officers, employees, and agents shall not be deemed to assume any liability for the acts, omissions and negligence of FLORIDA SPORTS and its officers, employees, and agents in the performance of services provided hereunder

(b) **Insurance.**

(1) FLORIDA SPORTS shall furnish COUNTY with a Certificate of Insurance signed by an authorized representative of the insurer evidencing the insurance required by this Section (Commercial General Liability). COUNTY, its officials, officers and employees shall be named additional insured under the Commercial General Liability policy. The Certificate of Insurance shall provide that COUNTY shall be given not less than thirty (30) days written notice prior to the cancellation or restriction of coverage. Until such time as the insurance is no longer required to be maintained by FLORIDA SPORTS, FLORIDA SPORTS shall provide COUNTY with a renewal or replacement Certificate of Insurance not less than thirty (30) days before expiration or replacement of the insurance for which a previous certificate has been provided.

(2) The Certificate of Insurance shall contain a statement that it is being provided in accordance with this Agreement and that the insurance is in full compliance with the requirements of this Agreement. In lieu of the statement on the Certificate, FLORIDA SPORTS shall, at the option of COUNTY, submit a sworn, notarized statement from an authorized representative of the insurer that the Certificate is being provided in accordance with this Agreement and that the insurance is in full compliance with the requirements of this Agreement.

(3) In addition to providing the Certificate of Insurance, if required by COUNTY, FLORIDA SPORTS shall, within thirty (30) days

after receipt of the request, provide COUNTY with a certified copy of each of the policies of insurance providing the coverage required by this Section.

(4) Neither approval by COUNTY nor failure to disapprove the insurance furnished by FLORIDA SPORTS shall relieve FLORIDA SPORTS of its full responsibility for performance of any obligation including its indemnification of COUNTY under this Agreement.

(5) Insurance Company Requirements. Insurance companies providing the insurance under this Agreement must meet the following requirements:

(A) Companies issuing policies must be authorized to conduct business in the State of Florida and prove same by maintaining Certificates of Authority issued to the companies by the Department of Insurance of the State of Florida.

(B) In addition, such companies other than those authorized by Section 624.4621, Florida Statutes, shall have and maintain a Best's Rating of "A-" or better and a Financial Size Category of "VII" or better according to A.M. Best Company.

(C) If during the period which an insurance company is providing the insurance coverage required by this Agreement an insurance company shall: 1) lose its Certificate of Authority, or 2) fail to maintain the requisite Best's Rating and Financial Size Category, FLORIDA SPORTS shall, as soon as it has knowledge of any such circumstance, immediately notify COUNTY and immediately replace the insurance coverage provided by the insurance company with a different insurance company meeting the requirements of this Agreement. Until such time as FLORIDA SPORTS has replaced the unacceptable insurer with an insurer acceptable to COUNTY, FLORIDA SPORTS shall be deemed to be in default of this Agreement.

(6) Specifications. Without limiting any of the other obligations or liability of FLORIDA SPORTS, FLORIDA SPORTS shall, at its sole expense, procure, maintain, and keep in force amounts and types of insurance conforming to the minimum requirements set forth in this Section. Except as otherwise specified in this Agreement, the insurance shall become effective prior to the commencement of the water polo championships and shall be maintained in force until this Agreement completion date. The amounts and types of insurance shall conform to the following minimum requirements.

(A) Commercial General Liability.

(i) FLORIDA SPORTS's insurance shall cover FLORIDA SPORTS for those sources of liability which would be covered by the latest edition of the standard Commercial General Liability Coverage Form (ISO Form CG 00 01), as filed for use in the State of Florida by the Insurance Services Office, without the attachment of restrictive endorsements other than the elimination of Coverage C, Medical Payment, and the elimination of coverage for Fire Damage Legal Liability.

(ii) The minimum limits to be maintained by FLORIDA SPORTS (inclusive of any amounts provided by an Umbrella or Excess policy) shall be as follows:

	<u>LIMITS</u>
General Aggregate	Two (2) Times the Each Occurrence Limit
Personal & Advertising Injury Limit	\$1,000,000.00
Each Occurrence Limit	\$1,000,000.00

(7) Coverage. The insurance provided by FLORIDA SPORTS pursuant to this Agreement shall apply on a primary basis and any other insurance or self-insurance maintained by COUNTY or COUNTY's officials, officers or employees shall be excess of and not contributing with the insurance provided by or on behalf of FLORIDA SPORTS.



(8) Occurrence Basis. The Commercial General Liability required by this Agreement shall be provided on an occurrence rather than a claims-made basis.

**Section 5. Billing and Payment.** COUNTY hereby agrees to provide funds up to a maximum sum of SEVEN THOUSAND SIX HUNDRED AND NO/100 DOLLARS (\$7,600.00) for facility use fees for the water polo championships listed in Exhibit A to this Agreement. Said funds are payable upon:

(a) Receipt by COUNTY of a Request for Funds Form, attached hereto and incorporated herein as Exhibit B, and a facility use invoice from FLORIDA SPORTS requesting all or part of the above be paid by COUNTY. The Request for Funds Form shall be properly completed with attached documentation including the original or copy of invoices and copies of cancelled checks. Such request by FLORIDA SPORTS shall only be for the facility use fees specifically provided for herein and shall be payable only to the governmental entity owning the facility being used. Failure to comply with this requirement shall result in termination of this Agreement and forfeiture of all financial assistance granted to FLORIDA SPORTS pursuant to this Agreement.

(b) Verification by the Seminole County Economic Development/Tourism Director that FLORIDA SPORTS has held or is holding the water polo championships for which facility use fees are sought and has complied with the reporting requirements contained hereinafter;

(c) The original payment requests shall be sent to:

Original:            Director  
                         Seminole County Economic Development/Tourism  
                         1230 Douglas Avenue, Suite 116  
                         Longwood, Florida 32779

A duplicate payment request shall be sent to:

Duplicate:          Director, Department of Finance  
                         Seminole County Services Building  
                         1101 East First Street  
                         Sanford, Florida 32771

(d) The final Request for Funds Form shall be accompanied by a detailed report of the economic impact on COUNTY resulting from the water polo championship funds for which have been provided hereunder. Such report, attached hereto and incorporated herein as Exhibit C, shall include, but not be limited to, the actual number of hotel or motel rooms occupied, restaurant meals consumed, and estimated goods and services expenditures.

(e) FLORIDA SPORTS is responsible for documenting the number of room nights actually utilized per event at each Seminole County hotel. FLORIDA SPORTS must have each hotel individually certify the actual number of rooms picked up by having the General Manager complete the Hotel Room Pickup Form, attached hereto and incorporated herein as Exhibit D. No payments will be processed until all required documentation has been submitted. COUNTY reserves the right to reduce the maximum amount of any grant awarded in the event guaranteed room nights are not satisfied.

(f) Payment of fees shall be contingent upon FLORIDA SPORTS's compliance with requirements as stated in Exhibit A.

**Section 6. Reporting Requirements.** In the performance of this Agreement, FLORIDA SPORTS shall maintain books, records, and accounts of all activities in compliance with normal accounting procedures. Each Request for Funds Form shall detail costs incurred. As referenced in Exhibit A, FLORIDA SPORTS shall transmit and certify interim records with each Request for Funds Form submitted to COUNTY.

**Section 7. Non-Reimbursable Expenditures.**

(a) Non-reimbursable expenditures include, but are not limited to, legal, engineering, accounting, auditing, planning, feasibility studies or consulting services, real property or capital improvements, interest reduction in deficits and liens, prize money, scholarships,

awards, plaques or certificates, private entertainment, lodging, food and beverages, and wages, salaries, administrative or travel expenses other than those appearing, if any, in Exhibit A.

(b) The purpose for which Tourist Development Tax grant funds are provided to FLORIDA SPORTS shall not duplicate programs for which monies have been received, committed, or applied for from another source. The monies provided hereunder shall be expended only for the activities or purposes set forth in Exhibit A.

**Section 8. Unavailability of Funds.** FLORIDA SPORTS acknowledges that Tourist Development Tax revenues are the source of funding for this Agreement and that no other COUNTY revenues shall or may be utilized to meet COUNTY's obligations hereunder. If, for whatever reason, the funds pledged by COUNTY to this program should become unavailable, this Agreement may be terminated immediately, at the option of COUNTY, by written notice of termination to FLORIDA SPORTS as provided hereinafter.

COUNTY shall not be obligated to pay for any services provided or costs incurred by FLORIDA SPORTS after FLORIDA SPORTS has received such notice of termination. In the event there are any unused COUNTY funds, FLORIDA SPORTS shall promptly refund those funds to COUNTY or otherwise use such funds as COUNTY directs.

**Section 9. Access to Records.** FLORIDA SPORTS shall allow COUNTY, its duly authorized agent, and the public access to such of its records as are pertinent to all services provided hereunder at reasonable times and under reasonable conditions for inspection and examination in accordance with Florida Statutes.

**Section 10. Liaison.** FLORIDA SPORTS shall submit the original copies of the Request for Funds Forms, the Narrative Progress Report Form, and any other required reports or correspondence to the following:

Director  
Seminole County Economic Development/Tourism  
1230 Douglas Avenue, Suite 116  
Longwood, Florida 32779

**Section 11. Notices.** Whenever either party desires to give notice unto the other, it shall be given in writing by certified United States mail, with return receipt requested, and sent to:

**For COUNTY:**

Director  
Seminole County Economic Development/Tourism  
1230 Douglas Avenue, Suite 116  
Longwood, Florida 32779

**For FLORIDA SPORTS:**

Larry Pendleton  
2930 Kerry Forrest Parkway  
Tallahassee, Florida 32309

Either of the parties may change, by written notice as provided above, the person or address for receipt of notice.

**Section 12. Assignments.** Neither party to this Agreement shall assign this Agreement nor any  interest arising herein without the written consent of the other.

**Section 13. Entire Agreement.**

(a) It is understood and agreed that the entire agreement of the parties is contained herein and that this Agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof as well as any previous agreements presently in effect between the parties relating to the subject matter hereof.

(b) Any alterations, amendments, deletions, or waivers of the provisions of this Agreement shall be valid only when expressed in writing and duly signed by the parties.

**Section 14. Compliance with Laws and Regulations.** In providing all services pursuant to this Agreement, FLORIDA SPORTS shall abide by all statutes, ordinances, rules, and regulations pertaining to or regulating the provisions of such services including those now in effect

and hereafter adopted. Any violation of said statutes, ordinances, rules, or regulations shall constitute a material breach of this Agreement and shall entitle COUNTY to terminate this Agreement immediately upon delivery of written notice of termination to FLORIDA SPORTS as provided hereinabove.

**Section 15. Conflict of Interest.**

(a) FLORIDA SPORTS agrees that it will not engage in any action that would create a conflict of interest in the performance of its obligations pursuant to this Agreement with COUNTY or which would violate or cause others to violate the provisions of Part III, Chapter 112, Florida Statutes, relating to ethics in government.

(b) FLORIDA SPORTS hereby certifies that no officer, agent, or employee of COUNTY has any material interest (as defined in Section 112.312(15), Florida Statutes, as over 5 percent), either directly or indirectly, in the business of FLORIDA SPORTS to be conducted here and that no such person shall have any such interest at any time during the term of this Agreement.

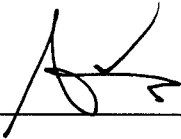
(c) Pursuant to Section 216.347, Florida Statutes, FLORIDA SPORTS hereby agrees that monies received from COUNTY pursuant to this Agreement will not be used for the purpose of lobbying the legislature or any other State or Federal agency.

**(Signature Page Follows)**

IN WITNESS WHEREOF, the parties to this Agreement have caused their names to be affixed hereto by the proper officers thereof for the purposes herein expressed on the day and year first above written.

ATTEST:

THE FLORIDA SPORTS CHARITABLE  
FOUNDATION, INC.

  
\_\_\_\_\_

By:   
LARRY PENDLETON, President

Date: 4/21/09

ATTEST:

BOARD OF COUNTY COMMISSIONERS  
SEMINOLE COUNTY, FLORIDA

\_\_\_\_\_  
MARYANNE MORSE  
Clerk to the Board of  
County Commissioners of  
Seminole County, Florida.

By: \_\_\_\_\_  
BOB DALLARI, Chairman

For the use and reliance  
of Seminole County only.

Approved as to form and  
legal sufficiency.



Date: \_\_\_\_\_  
As authorized for execution  
by the Board of County Commissioners  
at their \_\_\_\_\_, 20\_\_\_\_  
regular meeting.

\_\_\_\_\_  
County Attorney

AEC/lpk/sjs  
3/18/09, 4/3/09  
P:\Users\Legal Secretary CSB\Economic Development\Sunshine State Water Polo.doc

Attachments:

- Exhibit A - Project Description and Expenses
- Exhibit B - Request For Funds Form
- Exhibit C - Economic Impact Report
- Exhibit D - Hotel Room Pickup Form

EXHIBIT A

**PART II APPLICATION FOR FUNDS**  
**TOURIST DEVELOPMENT SPONSORSHIP**  
**FY 2008-09**

(1) NAME OF ORGANIZATION The Florida Sports Foundation

(2) NAME OF EVENT Sunshine State Games Water Polo Championships

(3) CONTACT PERSON Stephen V. Rodriguez

(4) CONTACT PERSON E-MAIL svrodriguez@flasports.com

(5) COMPLETE ADDRESS OF ORGANIZATION:

STREET 2930 Kerry Forest Parkway

CITY Tallahassee ST FLZIP 32309

PHONE: 850-410-5287. CELL: Click here to enter text. FAX: 850-922-0482

(6) ORGANIZATION'S CHIEF OFFICIAL: Larry Pendleton

TITLE: President/CEO Address if different from above: Click here to enter text.

PHONE: . CELL: Click here to enter text. FAX: Click here to enter text.

(7) INTENDED USE OF FUNDS: (Refer to Pages 6-7 – Authorized/Unauthorized Uses of Funds Facility Fee

(8) AMOUNT REQUESTED \$7,600

(9) IF ENTIRE REQUEST CANNOT BE FUNDED, CAN THE EVENT BE RESTRUCTURED FOR LESS FUNDING? ☐ YES ☒ NO

## **II DETAILS ON YOUR ORGANIZATION:**

In narrative form please describe your organization in the following areas. **Use a separate sheet to complete these questions in detail.**

(1) What are your organization's goals and objectives?

\* Please See Attachment A

(2) What services does your organization provide?

\* Please See Attachment A

(3) How will your organization monitor expenditure of funds?

\* Please See Attachment A

(4) How will your event bring additional visitors and hotel room nights to Seminole County?

\* Please See Attachment A

(5) What is your organization's experience in managing sponsorships and grants?

\* Please See Attachment A



**III EVENT INFORMATION (Use additional sheets where necessary.)**

- (1) EVENT NAME: Sunshine State Games Water Polo Championships  
(2) TYPE OF EVENT: Water Polo Tournament  
(3) DATE OF EVENT: June 12-14, 2009
- (4) NUMBER OF DAYS: 3 HOURS: FROM: 8:00am TO: 5:00pm
- (5) EVENT PROMOTER (IF OTHER THAN YOUR ORGANIZATION)  
NAME OF PROMOTER Stephen Rodriguez  
COMPANY NAME The Florida Sports Foundation  
ADDRESS: 2930 Kerry Forest Parkway Tallahassee FL 32309  
PHONE and FAX 850-488-8347 850-922-0482
- (6) PROJECTED NUMBER OF LOCAL PARTICIPANTS, GUESTS AND MEDIA 69
- (7) PROJECTED NUMBER OF OUT-OF-COUNTY PARTICIPANTS: 612  
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 3
- (8) PROJECTED NUMBER OF OUT-OF-COUNTY GUESTS OF PARTICIPANTS: 540  
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 3
- (9) PROJECTED NUMBER OF OUT-OF-COUNTY MEDIA PERSONS: 5  
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 3
- (10) PROVIDE THE ESTIMATED DIRECT ECONOMIC IMPACT ON SEMINOLE COUNTY FROM YOUR EVENT (The Eco Impact form for the application can be found on the website): \$399,100
- (11) WHAT IS THE **GUARANTEED MINIMUM** NUMBER OF ROOM NIGHTS YOUR EVENT WILL BRING TO SEMINOLE COUNTY? 350  
**Note: This number is the minimum number of rooms that must be captured by the event and documented by submitting the Room Night Pick-Up Form (Exhibit D) within 90 days of the conclusion of the event. Failure to meet this minimum room night guarantee, the total amount of grant disbursement will be decided by the Seminole County CVB.**
- (12) PROVIDE A LIST OF OTHER EVENT SPONSORS AND THE AMOUNT(S) OF THEIR SPONSORSHIPS. Central Florida Sports Commission - \$500
- (13) PROVIDE THE LOCATION, CONTACT NAME AND PHONE NUMBER FOR THE EVENT FOR THE LAST THREE YEARS. 2006-07 Broward County, FL Stephen Rodriguez – 850.410.5287  
2008 Miami-Dade County, FL Stephen Rodriguez – 850.410.5287

## Seminole County - Economic Impact

	Quantity	Multiplier	Event days	TOTALS
How much will event organizers spend locally?				\$ 9,100.00
How many adult out-of state participant/spectator days expected?	0	\$ 143.00	3	\$ -
How many youth out-of state participant/spectator days are expected?	0	\$ 72.00	3	\$ -
How many adult in-state participant/spectator days expected?	841	\$ 125.00	3	\$ 315,375.00
How many youth in-state participant/spectator days are expected?	375	\$ 63.00	3	\$ 70,875.00
How many out-of state media/professionals expected?	0	\$ 143.00	3	\$ -
How many in state media/ professionals expected?	10	\$ 125.00	3	\$ 3,750.00
What is the expected event-site spending?				
What other expenditures, if any, are anticipated?				
<b>TOTAL DIRECT IMPACT =</b>				\$ 399,100.00
	Direct Impact	Divider	Multiplier	
Total output economic impact:	\$ 399,100.00		1.5	\$ 598,650.00
Total earnings impact:	\$ 399,100.00		0.57	\$ 227,487.00
Total employment impact:	\$ 399,100.00	1,000,000	22	8.78
		Non-Taxable Sales	Sales Tax Rate	
<b>STATE SALES TAX GENERATED:</b>	Direct Impact	Sales		
	\$ 399,100.00		0.06	\$ 23,946.00
		State Sales Tax Generated	Florida DOR Disbursement Multiplier	
<b>STATE SALES TAX REIMBURSED TO COUNTY:</b>		\$ 23,946.00	0.09653	\$ 2,311.51
		Non-Taxable Sales	Option Sales Tax Rate	
<b>COUNTY LOCAL OPTION SALES TAX:</b>	Direct Impact	\$ -	0.01	\$ 3,991.00
	Estimated Rooms Per Night To Be Secured	Approximate Hotel Rooms Secured	Average Room Rate Per Night	
<b>TOTAL HOTEL IMPACT:</b>		350	\$80.00	\$ 28,000.00
	Total Hotel Impact		Resort Tax Rate	
<b>COUNTY RESORT TAX RECOUPED:</b>	\$ 28,000.00		0.05	\$ 1,400.00
<b>TOTAL RESORT TAX &amp; STATE SALES TAX RECOUPED BY COUNTY:</b>				\$ 7,702.51
<b>RENTAL COSTS OF FACILITIES OWNED &amp; RECOUPED BY THE COUNTY:</b>				\$ -
<b>RENTAL COSTS OF FACILITIES OWNED &amp; RECOUPED BY THE CITY:</b>				\$ -
<b>BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE COUNTY:</b>				\$ -
<b>BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE CITY:</b>				\$ -
<b>APPROXIMATE REVENUE RECOUPED BY THE COUNTY ON THE EVENT:</b>				\$ 7,702.51

(14) PLEASE PROVIDE DETAILS OF HOW THE EVENT WILL WORK. The Florida Sports Foundation will organize and operate all aspects of the event. The Water Polo State Championships will take place from June 12 through the 14 at both the Seminole High Aquatic Center and the Lake Brantley Aquatic Center. This championship is pool or bracket play, with each team guaranteed 4 games.

#### **IV SPORTING EVENT (If Applicable)**

- (1) NAME OF SPORT/EVENT: Sunshine State Games Water Polo Championships
- (2) LOCATION OF EVENT: (IF MORE THAN ONE, LIST ON SEPARATE SHEET.)  
Seminole High Aquatic Center and Lake Brantley Aquatic Center
- (3) TOTAL NUMBER OF FIELDS NEEDED: 3
- (4) TOTAL NUMBER OF FIELDS NEEDED PER DAY: 2 Friday / 3 Saturday and Sunday
- (5) NUMBER OF LIGHTED FIELDS REQUIRED: n/a
- (6) PROVIDE FIELD USE TIMES BY DAY: 8am – 5pm
- (6) SPECIAL FIELD REQUIREMENTS (PLEASE SPECIFY): n/a

#### **V OTHER OUTDOOR EVENT:**

- (1) LOCATION AND SIZE OF EVENT VENUE: 3 water polo courts are needed to accommodate this event. Both the Seminole High Aquatic Center and the Lake Brantley Aquatic Center have the necessary infrastructure to support and host the Sunshine State Games Water Polo Championships.
- (2) SPECIAL SITE REQUIREMENTS: n/a

## **EVENT BUDGET SUMMARY**

### **INCOME SOURCES:**

TOURIST DEVELOPMENT TAX REQUEST      \$7,600

ADDITIONAL FUNDING SOURCES (Seminole County cannot be sole source.)

Central Florida Sports Commission \$500

Florida Sports Foundation \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

**TOTAL ADDITIONAL FUNDS \$ 500**

### **OTHER INCOME SOURCES**

Entry Fees    \$ 13,600

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

Click here to enter text. \$ Click here to enter text.

**TOTAL OTHER INCOME                      \$ 13,600**

**TOTAL INCOME ALL SOURCES      \$ 21,700**

**EVENT EXPENSES:**

Provide an itemized summary indicating the intended use of TDC funds. Please be as explicit as possible, including intended publications, promotional materials, etc. and how much money will be expended (tentatively) for each category. Use additional sheets if necessary.

**Intended Utilization of Tourist Tax Funds**

(Please refer to authorized and unauthorized uses on page 6-7)

**Facility Fees \$7,600**

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

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**Total Tourism Funds:** **\$7,600**

**Other Event Expenses**

**Contract Labor\$2,000**

**S[prt Contracts\$5,500**

**Incentives\$2,500**

**Housing\$1,500**

**Insurance\$600**

**Misc. (Awards/Hospitality/Medical/Postage/Printing/General Expense\$1,825**

**Total Other Event Expenses** **\$13,925**

**TOTAL EVENT EXPENSES** **\$21,525**

**CERTIFICATION**

I have reviewed this Application for Funds from the Tourist Development Council for FY 2008-09. I am in full agreement with the information contained herein. To the best of my knowledge, the information contained in this Application and its attachments is accurate and complete.



\_\_\_\_\_  
Chief Corporate Officer

2-25-09

Date

Seal

\_\_\_\_\_  
Corporation Secretary

\_\_\_\_\_  
Date

## **ATTACHMENT A**

**1. What are your organization's goals and objectives?**

The Florida Sports Charitable Foundation is the 501(C)3 arm of the Florida Sports Foundation, the official sports promotion and development organization of the state of Florida. Our goal is to promote amateur and participatory sports for the citizens of Florida and attract out-of-state visitors through sports, thus creating new economic development. The Foundation is a private, not-for-profit corporation operating under contract with the Office of Tourism, Trade and Economic Development under the Executive Office of the Governor.

**2. What services does your organization provide?**

The Florida Sports Charitable Foundation is charged with the promotion and development of amateur sports, recreational activities and physical fitness opportunities that produce a thriving Florida sports industry and environment. One of the Foundation's main priorities is to publish free guides to help consumers make the most out of sport-related vacationing in Florida. The Charitable Foundation's primary function is the management of the Florida's Sunshine State Games and Florida Senior Games State Championships. The Florida's Sunshine State Games are Olympic-style programs and events created throughout the state for amateur athletes of all ages and skill levels. From grass-roots development programs to the Senior Games, Spring Games and Summer Games, Florida's citizens have the opportunity and incentive to develop their physical talents and competitive abilities.

**3. How will your organization monitor expenditure of funds?**

The Charitable Foundation will coordinate with the Seminole County Tourism Department and Central Florida Sports Commission to ensure that all of the necessary paperwork and proper justifications are submitted by the deadline in order to request remittance of reimbursable funds consistent with the terms of the agreement developed by Seminole County Government.

**4. How will your event bring additional visitors and hotel room nights to Seminole County?**

Approximately 38 adult and youth water polo teams from across the State of Florida are expected to compete at the 2009 Sunshine State Games Water Polo Championships staged in Altamonte Springs and Sanford. Previous events have been staged in Broward and Dade Counties, with as many as 44 teams in attendance. The Florida Sports Charitable Foundation will provide participating teams information on host hotels, local attractions, entertainment options and other pertinent information each will be requesting as they make their travel plans.

**5. What is your organization's experience in managing sponsorships and grants?**

The Charitable Foundation has extensive experience in managing both sponsorships and/or grants from Tourist Development Councils throughout the State of Florida. Grant funds have been awarded to the Foundation for the opportunity to host previous Senior Games, Spring Games and Summer Games.



EXHIBIT "B"  
REQUEST FOR FUNDS

SEMINOLE COUNTY TOURISM DEVELOPMENT  
1230 DOUGLAS AVENUE, #116, LONGWOOD FL 32779

EVENT NAME \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME OF CONTACT \_\_\_\_\_ CONTACT TELEPHONE \_\_\_\_\_

CONTACT E-MAIL \_\_\_\_\_

EVENT DATE FROM \_\_\_\_\_ TO \_\_\_\_\_

REQUEST # \_\_\_\_\_

( ) INTERIM REPORT ( ) FINAL REPORT

TOTAL CONTRACT AMOUNT \$ \_\_\_\_\_

<u>EXPENSE</u>	<u>BUDGET</u>	<u>REIMBURSEMENT REQUESTED</u>
_____	_____	_____
_____	_____	_____
TOTALS	_____	_____

(For Final Report only)  
Please complete the following:

#of Hotels used \_\_\_\_\_

#of Hotel room nights \_\_\_\_\_

#of out-of-town participants \_\_\_\_\_

#of out-of-town fans \_\_\_\_\_

#of out-of-town media \_\_\_\_\_

Total direct economic impact \$ \_\_\_\_\_

NOTE: Furnishing false information may constitute a violation of applicable State and Federal laws.

CERTIFICATION OF FINANCIAL OFFICER: I certify that the above information is correct based on our official accounting system and records, consistently applied and maintained and that the cost shown have been made for the purpose of and in accordance with, the terms of the contract. The funds requested are for reimbursement of actual cost made during this time period.

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

Exhibit "B"

## Exhibit C

## Seminole County - Economic Impact

	Quantity	Multiplier	Event days	TOTALS
How much will event organizers spend locally?				
How many adult out-of-state participant/spectator days are expected?		\$ 143.00		\$ -
How many youth out-of-state participant/spectator days are expected?		\$ 72.00		\$ -
How many adult in-state participant/spectator days are expected?		\$ 125.00		\$ -
How many youth in-state participant/spectator days are expected?		\$ 63.00		\$ -
How many out-of-state media/professionals days are expected?		\$ 143.00		\$ -
How many in-state media/ professionals expected?		\$ 125.00		\$ -
What is the expected event-site spending?				
What other expenditures, if any, are anticipated?				
<b>TOTAL DIRECT IMPACT =</b>				\$ -
	Direct Impact	Divider	Multiplier	
Total output economic impact:	\$ -		1.5	\$ -
Total earnings impact:	\$ -		0.57	\$ -
Total employment impact:	\$ -	1,000,000	22	\$ -
		Non-Taxable		
	Direct Impact	Sales	Sales Tax Rate	
<b>STATE SALES TAX GENERATED:</b>	\$ -		0.06	\$ -
			Florida DOR	
		State Sales Tax	Disbursement	
		Generated	Multiplier	
<b>STATE SALES TAX REIMBURSED TO COUNTY:</b>		\$ -	0.09653	\$ -
		Non-Taxable	Option Sales	
	Direct Impact	Sales	Tax Rate	
<b>COUNTY LOCAL OPTION SALES TAX:</b>	\$ -	\$ -	0.01	\$ -
	Estimated Rooms	Approximate Hotel	Average Room	
	Per Night To Be Secured	Rooms Secured	Rate Per Night	
<b>TOTAL HOTEL IMPACT:</b>				\$ -
	Total Hotel			
	Impact		Resort Tax Rate	
<b>COUNTY RESORT TAX RECOUPED:</b>	\$ -		0.05	\$ -
<b>TOTAL RESORT TAX &amp; STATE SALES TAX RECOUPED BY COUNTY:</b>				\$ -
RENTAL COSTS OF FACILITIES OWNED & RECOUPED BY THE COUNTY:				\$ -
RENTAL COSTS OF FACILITIES OWNED & RECOUPED BY THE CITY:				\$ -
BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE COUNTY:				\$ -
BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE CITY:				\$ -
APPROXIMATE REVENUE RECOUPED BY THE COUNTY ON THE EVENT:				\$ -



## SEMINOLE COUNTY CONVENTION & VISITORS BUREAU (CVB)

### ROOM NIGHT PICKUP CERTIFICATION FORM

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#### Request for Room Night Pick-UP

*Attn: General Manager, please provide the room night information for the event dates listed below as soon as possible:*

**Hotel Name/ Location:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Group Name:** \_\_\_\_\_

**Event Name:** \_\_\_\_\_

**Event Dates:** \_\_\_\_\_

I certify the organization/event listed above consumed the following room nights:

**Total Number of Room Nights Picked up from Events** \_\_\_\_\_

**GM Signature:** \_\_\_\_\_

The purpose of this form is to **certify the number of local hotel room nights in Seminole County attributable to this event.**

The Seminole County CVB reserves the right to unilaterally reduce the maximum amount of any grant awarded should the applicant's room night guarantee not be satisfied or documented with this Room Night Pick Up Certification Form.

Your cooperation in completing this form is greatly appreciated. For additional information please contact Sharon Sears, CVB Executive Director at (407) 665-2901.

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